

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	LT		12-20-99
O.I.P.E. CLASSIFIER		18	1-5-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	AS	59229	1/14/00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	08 02 19 27	08 02 19 27
2	✓	02 03 03 04	02 03 03 04
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
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50	✓	✓	✓

Claim	Final	Original	Date
51	✓	08 02 19 27	08 02 19 27
52	✓	02 03 03 04	02 03 03 04
53	✓	✓	✓
54	✓	✓	✓
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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